

ACBHCS ORGANIZATION PROVIDER SITE CERTIFICATION POLICY

Definitions:

Non-Residential: Mental Health Services, Medication Support Services, Day Treatment Services, Crisis Intervention, Case Management and Crisis Stabilization

Residential: Adult and Crisis Residential Treatment Services and Psychiatric Health Facility (PHF) Services. In addition to the site certification, these sites have additional certification requirements specified by the State.

Certification of Documentation: These documents include ACBHCS provider application, provider certification request form, program description and fire/safety assurance. These documents should be received and reviewed as a portion of the certification protocol and, as appropriate, *prior to* the on-site review.

Fire/Safety Inspection: The required fire/safety assurance must be a document signed and dated by the local fire/safety authority every three years.

Public School Programs: In lieu of the local fire/safety assurance, BHCS Administration may authorize a program operating in a public school to obtain: (1) a letter from the School District Superintendent assuring local fire/safety standards are met and property liability insurance is active; and (2) at the discretion of Alameda County Health Care Services Administration (ACHCSA), the School District housing the program site may be required to enter into a Memorandum of Understanding with ACHCSA in addition to providing the letter of assurance from the School District Superintendent.

Satellite sites: Organizational provider sites that operate less than 20 hours per week and are under the operation of a certified contract organization provider site (host site). School-based sites are designated as satellite sites only if they meet the satellite criteria.

Host site: A certified organizational provider site which provides clinical and administrative oversight of a satellite site. There must be a host site in order to establish a satellite site as defined in this policy.

Host County: The County in which a provider site is physically located.

Provider site (Organizational Provider Site): The physical location where the provider's administrative services are performed. The site may also be the physical address where services are delivered and may also serve as the host site to satellite sites or, in the case of community or in-home services, may be the administrative site that serves to house program medications, staff and medical records.

POLICY STATEMENT:

ACBHCS shall require all contracted organizational provider sites, residential and non-residential, to be certified in accordance with California Code of Regulations (CCR), Title 9, CCR, Section 1810.435 and the requirements specified in Appendix D of the ACBHCS contract with CA DMH. Exceptions and additions to this rule are as follows:

- A) Psychiatric inpatient and outpatient hospital-based provider sites are licensed by the State Department of Health Services, Licensing and Certification Division and/or the State Department of Mental Health, Licensing and Certification Division and are not required to be certified under provisions of this policy
- B)) *Prior* to site certification, residential, Mental Health Rehabilitation Centers (MHRC) and Psychiatric Health Facilities (PHF) are required to comply with any State Social Services or Department of Mental Health licensing or certification requirements.
- C) Out-of-County contract organizational providers are required to obtain and submit a copy of the host county's site certification letter along with any additional licensing or certification requirements stated above or, as applicable, required by Federal, County or State regulations.

All provider sites must be certified in accordance with the site certification protocol (Attachment A) and, as appropriate to day treatment sites, day treatment intensive or day treatment rehabilitative (Attachments B and C, respectively) protocols. These documents must meet the minimum requirements as set forth in CCR, Title 9 and the DMH Contract, Exhibit A, Attachment 1, Section K, and Exhibit E.

In addition to review of provider documentation as required for certification, an on-site certification review is conducted in compliance with the provisions of Title 9, CCR, Section 1810.435(d). All sites owned, leased or operated by the provider and used to deliver services to beneficiaries must be certified in order to claim Medicare or Medi-Cal reimbursement. At the discretion of BHCS, an on-site review may not be required for satellite sites.

School site certification must include an on-site certification visit unless the school site satisfies the requirements to be considered a satellite site and BHCS determines that an on-site visit is not required. An exemption from on-site review does not change the documentation requirements for certification. Satellite site certification is complete when the satellite site address and supporting documentation are included within the certification protocol of the certified provider site/host site.

A provider organization site may begin delivering covered services to beneficiaries at a site subject to on-site review (or re-certification) prior to the date of the on-site review, provided the site has been approved by ACBHCS Director or designee, is operational and has met the required documentation, including fire/safety assurance.

Requests for certification of contracted organizational provider sites must be submitted to ACBHCS Director or designee. Requests submitted directly to State Department of Mental Health (DMH) from providers will not be accepted.

ACBHCS must complete the certification review of the provider's documentation prior to the delivery of any services to beneficiaries that may be claimed for Medicare or Medi-Cal reimbursement.

ACBHCS must complete any required on-site review of a provider's sites within six months of the date the provider begins delivering services at the site.

All certified sites are required to be re-certified every three years or whenever certain events occur as defined below. The site re-certification requirements are the same as those for initial certifications as stated in this policy.

Additional certification reviews may become necessary in the following situations:

- A) There is change of legal entity or ownership. This will require a new certification application process.
- B) There is change of location. Emergency relocation due to natural disaster must be reported immediately and receive prior approval from ACBHCS Director or designee prior to operation. The request must be submitted in writing to the Quality Assurance Office.
- C) The provider makes major staffing changes. All providers must conform to staffing standards as described in CCR Title 9. The requirement for certification review in this situation is at the discretion of ACBHCS Director or designee.
- D) The provider makes organizational and/or corporate structural changes (example: conversion from non-profit status). This will require a new certification application process as would change of ownership.
- E) The provider intends to add and claim for Day Treatment or Medication Support services when Day Treatment or medication services were not previously certified for the provider site. The provider must notify ACBHCS of the intended change and may be required to participate in an on-site review.
- F) There are significant changes in the physical plant of the provider site. (Some physical plant changes could require a new fire clearance, but may not require a full re-submission of certification forms.)

- G) There are complaints regarding the provider or as a component of a corrective action plan required by ACBHCS Director or designee.
- H) There are unusual events, accidents, or injuries requiring medical treatment for clients, staff or members of the community. When persons are injured at a program site, a certification review including an on-site visit *may be* required.

When a change of ownership, location, or a program change occurs, the contract provider organization must notify ACBHCS at least 90 days prior to the change. ACBHCS Director or designee must notify State DMH 60 days prior to the changes noted by the contract provider organization. In these situations, the provider organization must provide to ACBHCS the following;

- Provider name, provider number and date of termination/change
- Name of new provider, if applicable
- New address of provider, if applicable
- Date of ownership, location, staffing or program changes, as applicable
- A new fire/safety inspection

Certification Letter:

Upon completing all required site certification requirements, the site will receive a letter of certification specifying the mode(s) of service permitted under the site certification. Following approval by ACBHCS Director or designee, medication support or day treatment services and other service modes may be added to an existing certified site upon satisfying the additional requirements for these services, as outlined in the certification and day treatment protocols cited above.

The completion of the provider site certification and subsequent issuance of the certification letter does not permit a provider to deliver services outside of the parameters outlined in the contract agreement with ACBHCS. The provider site certification letter does not serve as a contract agreement between the County and any legal entity/provider organization.

ACBHCS is not responsible for any liabilities, including payment for services delivered in conjunction with the delivery of services to beneficiaries at a provider site which has not been approved and certified by ACBHCS

Corrective Action Plan:

At the time of re-certification, if an existing provider site fails to meet the standards set forth in this policy, the QA Office will request a Plan of Correction (POC) from the provider. Upon receiving the POC, the QA Office will accept or not accept the POC and will establish a timeline for implementing the corrective

action(s). The provider may resubmit the POC for approval and implementation within the established timeline which may not exceed six months. If the provider site fails to develop a satisfactory POC or comply with the POC within the approved time, the provider will not meet the requirements for certification of the site. The consequence for not being certified will be discontinuation of claiming activity until the program meets standards and is certified.

Procedures:

The ACBHCS Office of Management Support Services, Quality Assurance Office is responsible to develop and maintain processes and procedures to implement all aspects of this policy.

Disclaimer: The language of this policy does not exempt contract organizational provider sites from meeting the requirements of any and all rules and regulations of applicable Federal, State or County jurisdictions and any applicable licensing or certifying bodies.